



102458-40932

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of
Codd et al.

Serial No. : 10/621,435 : Art Unit : 1724
Filed : July 17, 2003 : Examiner : Unassigned
For : BICIFADINE FORMULATION :

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

INFORMATION DISCLOSURE STATEMENT

Sir:

In accordance with 37 C.F.R. 1.97-1.99, applicants respectfully request that the following references be made of record in the above-identified application:

Other Documents

Epstein et al., "Bicifadine: Non-Narcotic Analgesic Activity of 1-Aryl-3-azabicyclo[3.1.0]hexanes," *NIDA Research Monograph.*, **41**:93-98 (April 1982).

Wang et al., "The Oral Analgesic Efficacy of Bicifadine Hydrochloride in Postoperative Pain," *J. Clin. Pharmacol.*, **22**:160-164 (1982).

Copies of the aforementioned publications are submitted herewith along with a completed form PTO-1449. The references are listed on form PTO-1449. Also enclosed is a copy of the International Search Report dated February 6, 2004.

The above citations do not constitute an admission that the references are relevant or material to the claims; they are cited only as constituting the closest art of which applicant is aware.

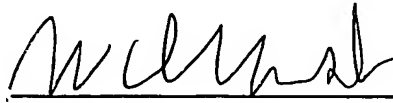
Correspondence and Fees

Pursuant to 37 C.F.R. §1.97(b), since the Information Disclosure Statement is submitted before the mailing of the first Office Action on the merits or within three months of the filing date for the above application, no fees are believed to be necessitated by this Information Disclosure Statement. Should any fee be required, please charge the required fee to Deposit Account No. 03-3839.

Please address all correspondence to Intellectual Property Docket Administrator, Gibbons, Del Deo, Dolan, Griffinger & Vecchione, One Riverfront Plaza, Newark, NJ 07102-5497. Telephone calls should be made to William H. Epstein at (973) 596-4607 and fax communications should be sent directly to her at (973) 639-6397.

Thank you for your consideration.

Date: March 2, 2002



William H. Epstein
Attorney for Applicant
Registration No. 20,008

Gibbons, Del Deo, Dolan,
Griffinger & Vecchione
One Riverfront Plaza
Newark, New Jersey 07102
(973) 596-4500



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| Substitute for form 1449B/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i> | | | | Complete if Known | |
| Application Number | | | | 10/621,435 | |
| Filing Date | | | | July 17, 2003 | |
| First Named Inventor | | | | Janet Codd | |
| Group Art Unit | | | | 1724 | |
| Examiner Name | | | | Unassigned | |
| Attorney Docket Number | | | | 102458-40932 | |
| Sheet | 1 | of | 1 | | |

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|-----------------------|--|--------------------|--|
| Examiner Signature | | Date Considered | |
|-----------------------|--|--------------------|--|

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Washington, DC 20231.